

P0855

EFFICIENCY OF COLONOSCOPY IN CASE OF POSITIVE FAECAL IMMUNOCHEMICAL TEST: ONE-YEAR EXPERIENCE AND RESULTS IN 391 PATIENTS IN ROUTINE PRACTICE IN FRANCE

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INTRODUCTION

Faecal immunochemical test (FIT) has progressively replaced the guaiac test for colorectal screening in average risk population in France since May 2015 (OC Sensor®, cut-off : 150 ng Hb/mL).

With a high sensitivity and a good specificity, it is supposed to increase colonic cancer detection.

However, its efficiency has not been described in routine colonoscopy.

PATIENTS AND METHODS

Prospective collection of the following data: Age, gender, quality of the preparation assessed by the Boston Scale, number and size of polyps and polyp histopathology.

Hyperplastic polyps located in the rectum or sigmoid colon were excluded of the study.

Neoplasia was defined as grade 4 or 5 of the Vienna classification (4: non-invasive high grade neoplasia (high grade adenoma/dysplasia, non-invasive carcinoma and suspicion of invasive carcinoma; 5: invasive neoplasia (intramucosal carcinoma, submucosal carcinoma or beyond).

Comparison was made with the whole population aged of 50 to 75, referred for other reasons during the same period (n=3876).

Multivariate statistical analysis: stepwise logistic regression.

RESULTS

391 patients with a positive FIT were included between 01/01/2016 and 31/12/2016 and were compared to 3876 patients aged of 50 to 75 referred for other indications.

Male: 201

Female: 190 (Figure # 1)

Good preparation in 93,6 % (Figure #2)

Characteristics of the polyps are shown in Figures 3 to 5.

498 polyps or lesions detected in 230 patients:

Polyp Detection Rate: 58.8 %

Mean Number of Polyp : 1.27

Adenoma Detection Rate: 58 %

Large polyp (≥ 1 cm) detection rate : 27.9 %

Neoplasia Detection Rate : 14.6 %

Comparison between Male and Female patients : Table # 1

Comparison between FIT and other indications : Table # 2

Results of multivariate analysis : Table # 3

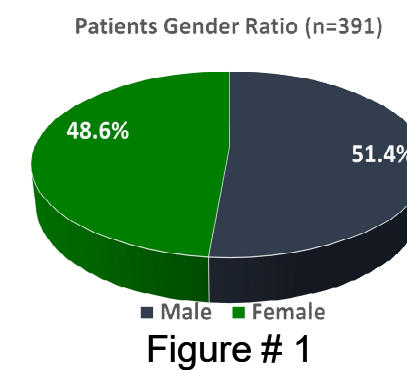


Figure # 1

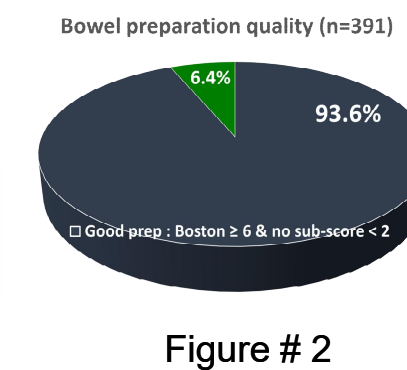


Figure # 2

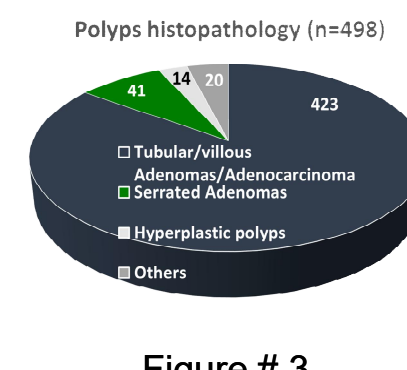


Figure # 3

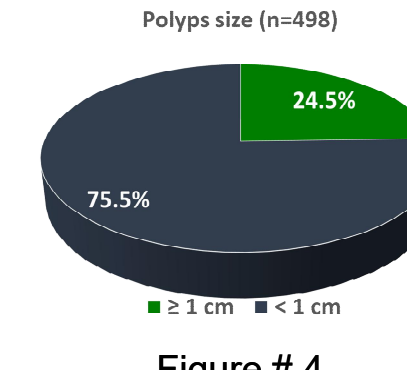


Figure # 4

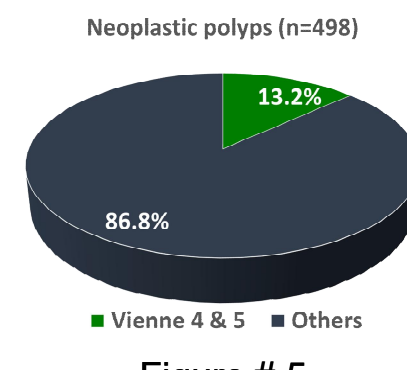


Figure # 5

	Male (n=201)	Female (n=190)	p (CHI-2)
Mean Number of Polyps	1.52	1	0.002
Adenoma Detection rate	67 %	49.5 %	0.0004
Large Polyp Detection Rate	30.8 %	24.7 %	0.18
Neoplasia Detection Rate	18.9 %	10 %	0.001

Table # 1: Indicators in Male and Female patients

	FIT + (n=391)	Whole population (n= 3876)	p (CHI2)
Mean Number of Polyps	1.27	0.7	10 ⁻⁶
Polyp Detection Rate	58.8 %	39.1 %	10 ⁻⁶
Adenoma Detection rate	58 %	37 %	10 ⁻⁶
Large Polyp Detection Rate	27,9 %	9,4 %	10 ⁻⁶
Neoplasia Detection Rate	14,6 %	4,9 %	10 ⁻⁶

Table # 2: Indicators in case of FIT+ and other indications

FIT +	OR	CI 95%	p
High Polyp Detection Rate	2.8	2.2 – 2.3.6	10 ⁻⁵
High Adenoma Detection rate	3.4	2.7 – 4.4	10 ⁻⁵
High Large Polyp Detection Rate	8.1	5.4 – 12.3	10 ⁻⁵
High Neoplasia Detection Rate	12.8	6.2 – 26.4	10 ⁻⁵

Table # 3 : Results of the multivariate analysis

CONCLUSIONS

In case of positive FIT, colonoscopy detects medically-relevant polyps in 59 % of patients.

Furthermore, the detection rates of large polyps (27.9 %) and neoplastic lesions (14.6 %) were very high, especially in Male patients, confirming the high predictive positive value of FIT compared to guaiac test.

Our results are in agreement with the highest quality benchmarks recently proposed in case of positive FIT (Hilsden RJ et al., Am J Gastroenterol, 2016 Oct 11).

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